





Operation Permit Application JCA-UST-002 LUST Date of filing: **UST - 2 -**EQB employee receiving the application: Carefully read all sections of this Operation Permit Application before completing this form. For additional information, call the Underground Storage Tanks Control Division of the Puerto Rico Environmental Quality Board at (787) 767-8181 or write to: rctas@jca.gobierno.pr. This application must be presented with the corresponding payment in cash, commercial check or money order, in the name of the Secretary of the Treasury. Type of **Operation Permit Renewal** Permit Modification Application: Complete the sections 1, 2, 3, 4, 5, 6, 7, 8 Complete the sections 1, 2, 3, 4, 5, 6, 7, 8 and Attachment R.3 and Attachment A Type of UST System to operate: **Existing registered** Existing not registered These Systems must request a new Operation Permit and pay Who has a valid Operation Permit the penalty for having a System that is not legalized or with an expired Operation Permit. 1. Facility Information Physical address: Owner of the UST System (Natural/Legal Person): Postal Address: Email: Phone: Owner of the property where the UST System is located (Natural/Legal Person): Postal Address: Postal: Email: Phone: Operator of UST System (Natural / Legal Person): Postal Address: Phone: Email: Natural / Legal Person where the UST System is located: Physical address where the UST System is located: Contact person in case of emergency (24) hours: Phone: Lambert Coordinates: (Degrees-Minutes-Seconds):

Type of owner:

Name of person who prepares the Application:

Type of UST System to Install:

UST System that store substances regulated under RCUST Federal Government

UST System for hazardous substances State Government

UST System of emergency electricity generators Municipal Government

UST Agricultural System (capacity> 1,100 gallons)

Industrial Wastewater Treatment Systems (Not covered under section 402 or 307 (b) of the CWA

Phone:

and that treat substances regulated under RCUST) Commercial

Hydrant fuel distribution systems located at airports Agricultural

UST System built on the ground Other: Other:

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Fmail:

2. Financial Responsibility

Mechanism of Financial Responsibility:

Commercial Insurance Policy

Self-insured

Corporate Guarantee or Deposit

Letter of credit

Trust Fund

Rand

Exempt according to Rule 863 RCUST

Other:

Effective date:

Due date:

3. Facility History

Complete the following table for all tanks present in the facility, as applicable:

	Re	gistered	with EQB		Actual Status		durin	s that will g the valid peration P	ity of the		
# UST	Yes	No	Date they were discovered	asn u	Temporarily out of use*	Abandoned	asn u	Temporarily out of use	Abandoned	Capacity (Gallons)	Stored product
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

In the installation they have been carried out additional actions by contamination? (Obligatory for LUST cases)

No, go to the next table

Yes, specify the following:

Type of action:

Site Investigation

Corrective Action

These actions were authorized by DCUST?

Yes, Submit evidence

No

Currently the actions continue in place?

Yes 1

No, Submit evidence of EQB release

Explanatory statement indicating the reason why it is temporarily out of use or abandoned.

Date that was put out of use. Understand the day the last fuel delivery was received or the last fuel delivery was made, whichever occurred first.

Proper operation and good maintenance of the corrosion protection system (if applicable) (Part III RCUST).

Proper operation and good maintenance of the leak detection system (Part IV).

Evidence that all material (water and product) has been removed from the UST and no more than 2.5 centimeters (1 inch) of waste or 0.3 percent of weight corresponding to the total capacity of the system.

Ventilation lines are open and running.

Lines, pumps, hatches and auxiliary equipment covered and secured.

Certify that there has been no confirmed or suspected leaks at the site.

Proposed date for permanent closure or to begin operating the UST temporarily out of use:

^{*} For tanks out of use must include the following information and/or evidence:

4. Information of the UST System to operate $\,$

			Description	ı Tanks ar	ıd Sto	rec	l Pro	oduct					
								Prod	ucto	Almac	enad	0	
# Tank	Capacity (gallons)	Manufacturer	Diameter (inches)	Length (foot)	Number of compartments	Gasoline	Diesel	Fuel oil	Querosene	Waste oil	Gasohol	Heating oil	Other substance (specify)
1													
2													
3													
4													
5													
6													
7													
8				_									
9				_									
10													

				Tank and Pip	e Specifio	cations			
		Material an	d type of Tank		Method c of the	of delivery e pipes	Type of pipe		
# Tank	Double wall, Steel	Double wall, Steel coated with fiberglass	Double wall, Fiberglass reinforced plastic (FRP)	Other (specify)	Pressure	Suction	Double wall, Fiberglass reinforced plastic (FRP)	Double wall, Approved Non-metallic	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

				lı	<u>nformati</u>	on of the Operators Train	ing	
	Category # # 15 # 15 # 15 # 15 # 15 # 15 # 15 #		у	91		·	_	
Name of Operator			Name of school where took training	Date of examination at EQB	Expiration date Operator Certificate issued by EQB			

Corrosion Protection System (If applicable):	Spill containment system:
Tank Pipeline	Tank Pipeline
Coating with dielectric material	Filling container and submersible pump
Anodes of sacrifice	Containment built on the ground
Fixed electric current	Other
Other	B 600
Leak detection system: (check all that apply)	Overfill prevention system:
Tank Pipeline	Tank Pipeline
Inventory Control (SIR)	Automatic shut-off valves or "flapper" (Drop-tube)
Mechanical integrity test	Electronic alarm and/or overfill valve
Automatic tank calibration (ATG)	Floating Valve Valves (Float Vent Valve)
Groundwater monitoring	(Discontinued)
Vapor monitoring	Other
Interstitial monitoring	Vapor recovery system
Inventory Statistical Reconciliation	Ventilation system - vents (<10.00 gallons/month)
Other	Stage I (<100,00 gallons/month)
	Stage II (>100,00 gallons/month)

5. Certification UST - 2 - -

"I certify that all the information presented in this document and in all the corresponding annexes is accurate, true and complete. The information provided has been presented without intent to distort the facts or commit fraud. I am aware that if any falsehood or fraud is discovered with respect to the documents I have signed, I will be subject to sanctions, including fines, imprisonment or both."

Owner of the UST System (Natural/Legal Person)	Name of the person who completed the Application	Operator of the UST System (Natural/Legal Person)
Owner Signature (Natural/Legal Person)	Signature of the person who completed the Application	Operator Signature (Natural/Legal Person)
Date	Date	Date
Annlications with incomplete information	will be understood as not submitted until all the required do	cuments or information have been submited.

6. Charges to Pay

			New					Permit R	enewal	
		Volume in gallons	Charges per tank	Number of tanks	Total		Volume in gallons	Charges per tank	Number of tanks	Total
		5,000 o menos					5,000 o menos			
	Stations	5,001 - 15,000				Stations	5,001 - 15,000			
	ias Sta	15,001 - 100,000				Gas Sta	15,001 - 100,000			
;	No G	100,001 o más				문	100,001 o más			
		Gas Stations					Gas Stations			
			Applicat	ion processing fees					ion processing fees	
			To	tal fees to be paid				To	tal fees to be paid	
			Major Modi	fication				Minor Modif	icación	
		C		ermit modification				Charges for mino	r permit modification	
				on processing fees				Applica	ation processing fees	
			Tati	al fees to be paid				Tı	otal fees to be paid	
This		Penalty U alty is for having a UST Syst	•	ot registered	on Donmit in		Penalty for Expir	ed Permit or	Unregistered sy	stem
		olty is for naving a UST Syst when the RCUST takes effect		auzen ni. Miinze nhetatit	OII ESI'IIIL IS		s penalty is for not having ma		ents to extend or modify	the Permit or
			Cl	harges for penalty		tor	having a non-legalized System		Charges for penalty	
			Total	penalty charges					tal penalty charges	
						<u> </u>			tui penuity enai yes	

TOTAL TO PAY:

The payment of all charges will be made through cash, commercial checks or money orders, payable to the Secretary of the Treasury Department of the Government of Puerto Rico. This payment must be made in the Finance Division of the Environmental Quality Board.

		FOR USE OF	THE ENVIR	ONMENTAL	QUAL	ITY BOAI	RD		
DCUST Technician'			n_	ı[f:l:_					
DCUST Technician's signature:					- Date of filing:				
Amount to pay:			Cash:			Check:		Money order:	
Receipt in the Finance Division:					Date of receipt:		t:		
Person Name in Finance receiving payment:					Payment date:				

ANNEX A. DOCUMENTS TO BE INCLUDED WITH THE OPERATOR PERMIT APPLICATION

ust be submitted sixty (60) days before the original Operation Permit expires)
y according to the applicable Mechanism that evidences that the UST to be operated have been covered during the last
r) for any eventuality and/or contamination that occurs during the works.
was evaluated that all the UST, buried pipe and auxiliary equipment operates perfectly as a UST System regulated
rity tests must be carried out by people certified by the manufacturers of the equipment with which these tests are
certification of the professional who performed this test.
e UST System.
r Training, issued by the Board, of all persons involved in the operation of the UST System:
g,g,
ion and maintenance of the last 3 years.
ance Division of the Environmental Quality Board.
es not apply
Anodes of Sacrifice (6 months for 1 year) Electric fixed current
ng of the test done every 3 years
conducted 6 months after the system was installed
ctions made every 60 days (only applies to electric fixed current systems)
of the certificate of the technician who performed the test
t apply)
Evidence of the last three (3) years of this method
Test conduct to the tanks in the last 5 years
Test conducted on the Pipelines (annual if it is pressure or 3 years if it is suction)
Test performed on the Leak detector
Copy of the certificate of the expert who performed the test
Evidence of the last three (3) years of this method
Evidence of the readings (printout) of the last 3 years
Copy of the certificate of the expert who performed the test
Report of groundwater monitoring wells of the last three (3) years
Vapor monitoring wells report for the last three (3) years
By sensors:
Evidence of readings issued by the system
Copy of the certificate of the expert who performed the test
Manual: Evidence from the last three (3) years
Evidence of the last three (3) years of this method
at apply)
three (3) years to:
Dispenser containers
iners Vapor recovery containers
k all that apply)
three (3) years to:
lves or "flapper" (Drop-tube)
or overfill valve

ANNEX A. DOCUMENTS TO BE INCLUDED WITH THE OPERATOR PERMIT APPLICATION

2. Permit modification									
		Day	Month	Year					
Operation Permit Approved by EQB:	Effectiveness Date								
	Expiration Date								

Documentos que se deben incluir:

Explanatory memorandum indicating the justified reasons why it requires the modification of the Operation Permit.

Copy of the Operation Permit Approved by EQB.

List of documents that were modified and specifying the parts, sections or others that were modified. Include all documents modified in original that are affected by the modification.

Payment corresponding to the Finance Division of the Environmental Quality Board.